Dear Healthcare Provider:

As of May 4, 2022, the Hawai’i State Department of Health (HDOH) has reported a total of 245,654 persons with SARS-CoV-2, the virus that causes COVID-19 disease, and 1,428 COVID-19-related deaths. Updates are provided to healthcare providers and the public about the availability and use of recommended therapies for COVID-19 and to advise against using unproven treatments that have known or potential harms for people. For persons with mild to moderate COVID-19, who are not hospitalized and who are at increased risk for severe COVID-19 outcomes, several treatment options are now widely available.

To access outpatient therapeutics for COVID-19, use the COVID-19 Test to Treat Locator tool to find facilities that offer testing, appointments, and treatment administration and pharmacies to fill a prescription. The Test to Treat call center at 1-800-232-0233 (TTY 1-888-720-7489) provides information in more than 150 languages; the Disability Information and Access Line is available at 1-888-677-1199.

The National Institutes of Health’s (NIH) COVID-19 Treatment Guidelines provide updated information on the appropriate use of clinically indicated therapeutics. For maximal effectiveness, treatment with oral antivirals (i.e., ritonavir-boosted nirmatrelvir and molnupiravir) must begin within 5 days of symptom onset and parenteral therapeutics (i.e., remdesivir and bebtelovimab) must begin within 7 days of symptom onset. For persons with mild to moderate COVID-19, who are not hospitalized and who are at increased risk for severe COVID-19 outcomes, prescribe one of the following therapeutics:
Preferred Therapies (listed in order of preference)
   a. Ritonavir-boosted nirmatrelvir (Paxlovid)
   b. Remdesivir

Alternative Therapies (listed alphabetically)
For use only when neither of the preferred therapies is available, feasible to use, or clinically appropriate.
   a. Bebtelovimab
   b. Molnupiravir

There are considerable differences in effectiveness, risk profiles, and use restrictions between the two preferred antivirals. The NIH’s COVID-19 Treatment Guidelines have important therapeutic considerations, such as the potential for significant drug-drug interactions with ritonavir-boosted nirmatrelvir (Paxlovid) and dosing regimens for patients with renal impairment.

Do **not** use dexamethasone and other systemic corticosteroids to treat patients with mild to moderate COVID-19 who do not require hospitalization or supplemental oxygen; these drugs have no proven benefit in these patients and can cause harm.

Do **not** use antibacterial therapy to treat COVID-19 in the absence of another indication; these drugs have no benefit for treating viral infections and can cause harm.

Encourage all persons to remain up to date with COVID-19 vaccination. Persons who are immunocompromised or severely allergic to COVID-19 vaccines may receive tixagevimab co-packaged with cilgavimab (Evusheld), a long-acting combination monoclonal antibody therapy given by intramuscular injection for pre-exposure prophylaxis of COVID-19. To find Evusheld distribution locations, use the COVID-19 Therapeutics Locator or call the support line at 1-800-232-0233 (TTY 888-720-7489).

Additional resources are available on the HDOH COVID-19 website under the For Clinicians tab, Therapeutics for the Outpatient Treatment of COVID-19, including links to a Side-by-Side Comparison Table for all Outpatient COVID-19 Therapeutics and the COVID-19 Therapeutics Locator.

We appreciate your assistance in treating Hawaii’s residents and visitors with mild to moderate COVID-19, who are not hospitalized and who are at increased risk for severe COVID-19 outcomes, to prevent morbidity, hospitalizations, and deaths.

Sincerely,

Sarah K. Kemble, MD
State Epidemiologist